

Taking up the reins

H Ward, R Miller

New challenges, new opportunities

It is a challenging time to be taking up the reins of *Sexually Transmitted Infections*. After a prolonged period of decline, there are epidemics of bacterial STIs in the United Kingdom and Western Europe, including outbreaks of syphilis. HIV continues to escalate; the prevalence of HIV is escalating due to persistent or rising incidence combined with increased survival. Globally we face major epidemics of HIV in India and China that could rival that of sub-Saharan Africa.¹ For people with access to health care treatment is improving for viral infections, including HIV. This offers great hopes but is also placing complex demands on clinicians and patients, not least those of compliance and possible "treatment optimism."^{2,3} And as soon as we get one step ahead of the bugs with drugs, accelerated resistance threatens these gains.

There are exciting developments in diagnostic techniques that increase sensitivity and specificity, identify subtypes, and may provide rapid answers in near patient tests. The impact of these advances is yet to be fully felt, and this issue of *STI* includes a number of articles on the clinical, epidemiological, and psychological implications of type specific screening for HSV antibodies⁴⁻⁶ and on approaches to chlamydia screening in the community.⁷⁻¹²

In the United Kingdom there are particular challenges in relation to the delivery of sexual health care, with demand outstripping capacity for services. The roles of all professionals within the field of sexual health and HIV is changing, with more nurse led patient care, and an emphasis on networks of care that include a bigger role for the primary care team. Such changes require careful governance of clinical medicine, an issue that also affects clinicians in the United Kingdom, who will be required to

demonstrate ongoing competence through a revalidation process.

Keeping up with all these developments is difficult but essential, and we think that *Sexually Transmitted Infections* is already a useful tool for practitioners. In taking on the roles of joint editors we hope that we can continue to improve the journal and make it even more relevant and useful.

We see the major role of the journal as providing the evidence base, in a digestible form, to inform practitioners, trainees, and researchers in our field. In addition to publishing peer reviewed papers, we aim to have more systematic reviews, state of the art leading articles, and regular reports on trends in the epidemiology of STI and HIV. Taken together these will enable readers to keep up to date with broad developments as well as their particular interests. To promote the educational side of the journal we hope to link key review articles or commentaries, some with linked case reports, to online CME activities, and will work closely with the MSSVD/AGUM societies. Over time this will build into a bank of material that should be useful for practitioners and those in training.

We move into the leadership of this journal at a time of rapid change in publishing. The electronic version of *STI* is popular, and allows much wider access to our material than in the past, including free access for people in resource poor countries. It also allows us to make available material from research papers, such as questionnaires or detailed tables, which would be too detailed for most readers yet of interest to some. In the near future we may be publishing papers on the website as soon as they are accepted, thereby reducing the frustrating delays between acceptance and publishing dates. Some people will be excited by the possibility of downloading

contents to portable electronic devices, others will pale at the thought!

Our predecessor, Mohsen Shahmanesh, wrote in his final editorial that a young colleague felt the journal sometimes served the needs of authors rather than readers. Mo moved the journal a long way towards being a more accessible and lively journal, and we hope to continue that journey, and ensure that we provide something that you, our readers, find useful and enjoyable. Let us know what you think!

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Authors' affiliations

H Ward, R Miller, Editors, *STI*;
mdiml@bmjgroup.com

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